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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/685,697	10/09/2000	Jeffrey J. Clawson	23517/4.7	3948
32642	7590	10/09/2007	EXAMINER	
STOEL RIVES LLP - SLC 201 SOUTH MAIN STREET ONE UTAH CENTER SALT LAKE CITY, UT 84111			ADDY, THJUAN KNOWLIN	
			ART UNIT	PAPER NUMBER
			2614	
			MAIL DATE	DELIVERY MODE
			10/09/2007	PAPER

Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

Office Action Summary	Application No.	Applicant(s)	
	09/685,697	CLAWSON, JEFFREY J.	
	Examiner	Art Unit	
	Thjuan K. Addy	2614	

-- The MAILING DATE of this communication appears on the cover sheet with the correspondence address --

Period for Reply

A SHORTENED STATUTORY PERIOD FOR REPLY IS SET TO EXPIRE 3 MONTH(S) OR THIRTY (30) DAYS, WHICHEVER IS LONGER, FROM THE MAILING DATE OF THIS COMMUNICATION.

- Extensions of time may be available under the provisions of 37 CFR 1.136(a). In no event, however, may a reply be timely filed after SIX (6) MONTHS from the mailing date of this communication.
- If NO period for reply is specified above, the maximum statutory period will apply and will expire SIX (6) MONTHS from the mailing date of this communication.
- Failure to reply within the set or extended period for reply will, by statute, cause the application to become ABANDONED (35 U.S.C. § 133). Any reply received by the Office later than three months after the mailing date of this communication, even if timely filed, may reduce any earned patent term adjustment. See 37 CFR 1.704(b).

Status

- 1) ☒ Responsive to communication(s) filed on 30 July 2007.
- 2a) ☒ This action is **FINAL**. 2b) ☐ This action is non-final.
- 3) ☐ Since this application is in condition for allowance except for formal matters, prosecution as to the merits is closed in accordance with the practice under *Ex parte Quayle*, 1935 C.D. 11, 453 O.G. 213.

Disposition of Claims

- 4) ☒ Claim(s) 1-11 is/are pending in the application.
- 4a) Of the above claim(s) _____ is/are withdrawn from consideration.
- 5) ☐ Claim(s) _____ is/are allowed.
- 6) ☒ Claim(s) 1-11 is/are rejected.
- 7) ☐ Claim(s) _____ is/are objected to.
- 8) ☐ Claim(s) _____ are subject to restriction and/or election requirement.

Application Papers

- 9) ☐ The specification is objected to by the Examiner.
- 10) ☒ The drawing(s) filed on 09 October 2000 is/are: a) ☒ accepted or b) ☐ objected to by the Examiner.
- Applicant may not request that any objection to the drawing(s) be held in abeyance. See 37 CFR 1.85(a).
- Replacement drawing sheet(s) including the correction is required if the drawing(s) is objected to. See 37 CFR 1.121(d).
- 11) ☐ The oath or declaration is objected to by the Examiner. Note the attached Office Action or form PTO-152.

Priority under 35 U.S.C. § 119

- 12) ☐ Acknowledgment is made of a claim for foreign priority under 35 U.S.C. § 119(a)-(d) or (f).
- a) ☐ All b) ☐ Some * c) ☐ None of:
1. ☐ Certified copies of the priority documents have been received.
 2. ☐ Certified copies of the priority documents have been received in Application No. _____.
 3. ☐ Copies of the certified copies of the priority documents have been received in this National Stage application from the International Bureau (PCT Rule 17.2(a)).

* See the attached detailed Office action for a list of the certified copies not received.

Attachment(s)

- | | |
|--|---|
| 1) <input type="checkbox"/> Notice of References Cited (PTO-892) | 4) <input type="checkbox"/> Interview Summary (PTO-413) |
| 2) <input type="checkbox"/> Notice of Draftsperson's Patent Drawing Review (PTO-948) | Paper No(s)/Mail Date. _____ |
| 3) <input type="checkbox"/> Information Disclosure Statement(s) (PTO/SB/08) | 5) <input type="checkbox"/> Notice of Informal Patent Application |
| Paper No(s)/Mail Date _____ | 6) <input type="checkbox"/> Other: _____ |

DETAILED ACTION

Response to Amendment

1. Applicant's amendment filed on July 30, 2007 has been entered. No claims have been amended. No claims have been cancelled. No claims have been added. Claims 1-11 are still pending in this application, with claim 1 being independent.

Claim Rejections - 35 USC § 103

2. The text of those sections of Title 35, U.S. Code not included in this action can be found in a prior Office action.

3. Claims 1-11 are rejected under 35 U.S.C. 103(a) as being unpatentable over Moore (US 4,237,344), in view of Chambers (US 5,086,391), and further in view of Brown (US 6,968,375).

4. In regards to claims 1, 9, 10, and 11, Moore discloses a method for managing the exit process of an emergency medical dispatch system, for dispatching medical assistance to persons needing such medical assistance (See col. 2-3 lines 66-5), comprising the steps of: receiving a medical call on a telephone communication device regarding a patient needing medical assistance, said patient having a chief complaint (e.g., particular medical need); receiving a description of a problem giving rise to a call for medical assistance (See col. 10 lines 19-32); and assigning one of a plurality of pre-established determinant levels based on the description of said problem, said description of said problem used in determination of said determinant level (For

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example, the health care provider (i.e., dispatcher) "upon receipt of the patient's signal (i.e., the description)...can accurately and precisely make an informed decision on the degree of medical response required", furthermore, the health care provider communicates his/her decision on the degree of medical response to the desired personnel) (See Moore col. 3 lines 59-66). Furthermore, the determination, such as determining if the caller is the patient, fall within the scope of standard medical diagnostic procedures and therefore, would have been obvious to one of ordinary skill in the art at the time the invention was made. Moreover, determining if said received call concerns trauma or an illness; and determining if said chief complaint concerns at least one of hemorrhaging, amputation, hazardous materials, a violent patient, an assailant, an animal, a present danger, and a burned patient, would have been equally obvious, due to the fact that they also fall within the scope of standard medical diagnostic procedures. However, Chambers does disclose assigning one of a plurality of pre-established determinant levels based on the description of said problem (e.g., injury), said description of said problem used in determination of said determinant level further comprising: determining if said received call concerns trauma or an illness; dispatching a medical response (e.g., instructions) based on said determinant level; and providing post dispatch instructions (for example, the post dispatch instructions, for a minor burn, may be, "immerse in clean ice water for ten minutes", "apply a clean, no-stick bandage", etc., or the instructions may be for performing CPR) to a caller, prior to the arrival of the responders to prepare the patient for the responders and to expedite the field responders' work, based on said determinant level, thereby eliminating variability due to

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the different skills of the individual dispatchers (See col. 5 lines 20-44 and col. 5 lines 66-68). Although Chambers does not specifically disclose determining if said chief complaint concerns at least one of hemorrhaging, amputation, hazardous materials, a violet patient, an assailant, an animal, a present danger, and a burned patient, Chambers does disclose determining if said chief complaint concerns at least one of shock, bleeding, animal bites, heart attack, etc., therefore, it would have been obvious to include the above limitations as chief complaints. Therefore, it would have been obvious for one of ordinary skill in the art at the time of the invention to incorporate these features within the method, as a way of providing specific medical assistance to an injured or ill individual. In regards to the limitation, wherein said determinations are made using a systematic pre-scripted interrogation of callers, said systematic pre-scripted interrogation including a medium readable by a dispatcher and including a logical process having a plurality of preprogrammed inquiries and wherein said determinant level is determined based on responses to the preprogrammed inquiries, thereby eliminating variability due to the different skills of the individual dispatchers, the Examiner takes Office Notice that the limitation reads on well known procedures of pre-screening, through means of a questionnaire, for emergency need and dispatching. It is well known that standard questions, such as chest pain, hemorrhage, or concussions, are done in a methodological manner before determining which kind of help the patient will need. Moreover, Brown discloses the use of pre-scripted (e.g., script program 40, See Fig. 2) questions that are readable by an individual (i.e., health care professional or service provider). The pre-scripted questions, are used by the individual to determine

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the appropriate service needed for the patient/user, based on the patient's/user's response to the questions (See Abstract and col. 15-16 lines 53-2). Therefore, it would have been obvious for one of ordinary skill in the art at the time of the invention to incorporate these features within the method, as a way of providing the calling party with the appropriate information based on his or her specific needs. Thus, ensuring proper care and information to the calling party.

5. In regards to claims 2, 3, and 7, Moore and Brown discloses all of claims 2, 3, and 7 limitations, except a method for managing the exit process of an emergency medical dispatch system, wherein said providing post dispatch instructions further comprises providing instructions based on a hemorrhaging patient, a patient suffering amputation, or a patient suffering from burns. Although Chambers does not specifically disclose determining if said chief complaint concerns at least one of hemorrhaging, amputation, or burns, Chambers does disclose determining if said chief complaint concerns at least one of shock, bleeding, animal bites, heart attack, etc., (See col. 5 lines 50-65) therefore, it would have been obvious to include the above limitations as chief complaints.

6. In regards to claims 4, 5, 6, and 8, Moore and Brown discloses all of claims 4, 5, 6, and 8 limitations, except the method for managing the exit process of an emergency medical dispatch system, wherein said providing post dispatch instructions further comprises providing instructions based on a hazardous material solution, a violent patient situation, the presence of an assailant or dangerous animal, or a present danger situation. Although Chambers does not specifically disclose determining if said chief

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complaint concerns at least one of a hazardous material solution, a violent patient situation, the presence of an assailant or dangerous animal, or a present danger situation. Chambers does disclose determining if said chief complaint concerns at least one of shock, bleeding, animal bites, heart attack, etc., (See col. 5 lines 50-65) therefore, it would have been obvious to include the above limitations as chief complaints.

Response to Arguments

7. Applicant's arguments filed 07/30/2007 have been fully considered but they are not persuasive.

8. Applicant argues that Moore does not teach or suggest assigning one of a plurality of pre-established determinant levels to a call as recited in Claim 1, but in contrast, states that the health care coordinator is to make an informed decision as to the degree of medical response required, and that an "informed decision" is not an assignment of one of a plurality of pre-established determinant values, and that claim 1 explicitly addresses this problem by reciting a determinant level based on responses to preprogrammed inquires, "thereby eliminating variability due to the different skills of the individual dispatchers [or health coordinators]." Applicant further states that Chambers neither teaches nor suggests assigning one of a plurality of pre-established determinant levels to a call as recited in Claim 1, but merely states that a user may press a button corresponding a to particular condition to hear audio treatment instructions, and even if it could be construed as such, Claim 1 recites that the assignment is base on

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"responses to preprogrammed inquires, thereby eliminating variability due to the different skills of the individual dispatchers," and Chambers requires that a user make the inherently subjective decision of which buttons to press, in which no preprogrammed inquires on which to base this purported determination are taught or suggested.

Applicant further argues that the Office Action does not purport that Brown teaches or suggests assigning one of a plurality of determinant levels to a call.

9. In response to the above arguments, made by Applicant, Examiner respectfully disagrees. It appears that Applicant is arguing the references individually. In response to applicant's arguments against the references individually, one cannot show nonobviousness by attacking references individually where the rejections are based on combinations of references. See *In re Keller*, 642 F.2d 413, 208 USPQ 871 (CCPA 1981); *In re Merck & Co.*, 800 F.2d 1091, 231 USPQ 375 (Fed. Cir. 1986). For example, Moore discloses assigning one of a plurality of pre-established determinant levels based on the description of said problem, said description of said problem used in determination of said determinant level (For example, the health care provider (i.e., dispatcher) "upon receipt of the patient's signal (i.e., the description)...can accurately and precisely make an informed decision on the degree of medical response required", furthermore, the health care provider communicates his/her decision on the degree of medical response to the desired personnel) (See Moore col. 3 lines 59-66).

Furthermore, the determination, such as determining if the caller is the patient, fall within the scope of standard medical diagnostic procedures and therefore, would have been obvious to one of ordinary skill in the art at the time the invention was made.

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Moreover, determining if said received call concerns trauma or an illness; and determining if said chief complaint concerns at least one of hemorrhaging, amputation, hazardous materials, a violent patient, an assailant, an animal, a present danger, and a burned patient, would have been equally obvious, due to the fact that they also fall within the scope of standard medical diagnostic procedures. Chambers, also, discloses assigning one of a plurality of pre-established determinant levels based on the description of said problem (e.g., injury), said description of said problem used in determination of said determinant level further comprising: determining if said received call concerns trauma or an illness; dispatching a medical response (e.g., instructions) based on said determinant level; and providing post dispatch instructions (for example, the post dispatch instructions, for a minor burn, may be, "immerse in clean ice water for ten minutes", "apply a clean, no-stick bandage", etc., or the instructions may be for performing CPR) to a caller, prior to the arrival of the responders to prepare the patient for the responders and to expedite the field responders' work, based on said determinant level, thereby eliminating variability due to the different skills of the individual dispatchers (See col. 5 lines 20-44 and col. 5 lines 66-68). In regards to the limitation, wherein said determinations are made using a systematic pre-scripted interrogation of callers, said systematic pre-scripted interrogation including a medium readable by a dispatcher and including a logical process having a plurality of preprogrammed inquiries and wherein said determinant level is determined based on responses to the preprogrammed inquiries, thereby eliminating variability due to the different skills of the individual dispatchers, the Examiner takes Office Notice that the

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limitation reads on well known procedures of pre-screening, through means of a questionnaire, for emergency need and dispatching. It is well known that standard questions, such as chest pain, hemorrhage, or concussions, are done in a methodological manner before determining which kind of help the patient will need. Moreover, Brown discloses the use of pre-scripted (e.g., script program 40, See Fig. 2) questions that are readable by an individual (i.e., health care professional or service provider). The pre-scripted questions, are used by the individual to determine the appropriate service needed for the patient/user, based on the patient's/user's response to the questions (See Abstract and col. 15-16 lines 53-2).

Conclusion

10. **THIS ACTION IS MADE FINAL.** Applicant is reminded of the extension of time policy as set forth in 37 CFR 1.136(a).

11. A shortened statutory period for reply to this final action is set to expire **THREE MONTHS** from the mailing date of this action. In the event a first reply is filed within **TWO MONTHS** of the mailing date of this final action and the advisory action is not mailed until after the end of the **THREE-MONTH** shortened statutory period, then the shortened statutory period will expire on the date the advisory action is mailed, and any extension fee pursuant to 37 CFR 1.136(a) will be calculated from the mailing date of the advisory action. In no event, however, will the statutory period for reply expire later than **SIX MONTHS** from the mailing date of this final action.

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12. Any inquiry concerning this communication or earlier communications from the examiner should be directed to Thjuan K. Addy whose telephone number is (571) 272-7486. The examiner can normally be reached on Mon-Fri 8:30-5:00pm.

13. If attempts to reach the examiner by telephone are unsuccessful, the examiner's supervisor, Ahmad Matar can be reached on (571) 272-7488. The fax phone number for the organization where this application or proceeding is assigned is 571-273-8300.

14. Information regarding the status of an application may be obtained from the Patent Application Information Retrieval (PAIR) system. Status information for published applications may be obtained from either Private PAIR or Public PAIR. Status information for unpublished applications is available through Private PAIR only. For more information about the PAIR system, see <http://pair-direct.uspto.gov>. Should you have questions on access to the Private PAIR system, contact the Electronic Business Center (EBC) at 866-217-9197 (toll-free). If you would like assistance from a USPTO Customer Service Representative or access to the automated information system, call 800-786-9199 (IN USA OR CANADA) or 571-272-1000.

A handwritten signature in black ink, appearing to read 'Thjuan K. Addy', with a long horizontal flourish extending to the right.

Thjuan K. Addy
Patent Examiner
AU 2614